<u>Transmission Request Form</u> (In case of death of the sole holder)

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PART – II : (where nomination is not recorded) No Objection Statement from other heirs/successors who are non-applicants

1. I/We, the undersigned, re am/are legal heir(s) of the sa		
annate legal field (s) of the sa	au ueceaseu.	
whatsoever in transmitting the	ke any claim of title of the said se he said securities in the name(s)	of Mr. / Mrs.
	who has/have opened a benef	ficial owner account(s) under Client
IDand DP ID	·	
•		in the client account of Mrs. / Mrs.
		ng as well as those that may accrue
to me/us in future in respect	of the aforesaid securities.	
	_	
Signed in the presence of	Ī	
Bank Manager		Signature of the legal heir
- U.N	CD 1.44	
Full Name and Address of	r Bank Manager:	
Name :		
Address :		
_	accessors who are applicants	
•	•	by claimants/non-claimants to
		rities wherein the intentions of the
legal heirs/successors are	collectively stipulated.	
=======================================	======(Please tear here)====	
Application No.	Acknowledgement Receip	Date: -
		on of securities from the deceased BO's
		of the successor or nominee (in case of
Minor), as per details given on		
Account number of the decease	3 4 6 0 0 Client ID	
) 2 0	3 4 0 0 0 Client ID	
	Successor BO Name(s)	
First / Sole Holder	Second Holder	Third Holder
Documents Submitted		

Subject to verification.

<u>Transmission Request Form</u> (In case of death of one / more of the joint holders)

Application No.	Date									
(Please fill all the details in Block Letters in English)					1					
To, Systematix Shares and Stocks (I) Ltd. 2 nd Floor, J.K Somani Bldg British hotel lane, Fort Mumbai 400001										
Dear Sir / Madam,										
I / We, the joint holder(s) / Successors request you to tra	nsmit the	securities	balar	nce fi	om:					
DP ID 1 2 0 3 4 6 0 0	Client	ID								
То										
DP ID 1 2 0 3 4 6 0 0	Client	ID								
Due to the death of										
										er(s)).
Original Death Certificate / copy of Death Certificate (duattached herewith.	uly notarize	ed / attest	ed u	nder	seal	by a	Gaz	zette	ed Of	ficer
First / Sole Holder				Se	cond	Hole	der			
Name(s) of the surviving holder(s)										
Signature(s) of the surviving holder(s)										
======================================	gement R	eceipt	Da	ate: -		===	===	:==	===	===
DP ID	Client	ID								
To						-			ı	
DP ID 1 2 0 3 4 6 0 0	Client	וט								
Surviving Holder(s) Name(s)	1									
First/Sole Holder			Sec	ond	Hold	er				
Documents Submitted	<u> </u>									-
Subject to verification.										

is

Affidavit

I,				
			residing at _	do hereby solemnly
affir	m an oath and state as under:	-		
Acco	ount No	with The said deceased was h		a Depository
	ISIN	Name of Company	Numb	er of securites
		estate on at egal heir(s) of late Mr. / Mrs		
	Name	Address	Age	Relationsip with the deceased
1				
3				
5. TI indiv	nat all the legal heirs of my de vidual/joint beneficial owner icipant/CDSL holding the Parti	ceased have a have executed a gair consequence of any claim whice said shares.	applied to gister the aforesai Letter of Indemist any loss, cost,	d securities in my/our nity in favour of the expenses or damages
I he beer secu	n concealed therein and that I prities.	hat what is stated herein above am competent to contract and er	is true to my know ntitled to rights and	d benefits of the above

Signed in the presence of Name :	
Address :	
City Pin	
Registration No :	_
(Signature of Magistrate / Notary)	
Use space below to affix: Notarial / Court Fee Stamp	Official Seal of Magistrate / Notary
Notalial/Court Fee Stamp	Official Seal of Wagistrate / Notary

Notes:

- 1. This affidavit is to be executed in the presence of a first class or stipendiary Magistrate / Public notary / Judicial.
- 2. Each deponent should sign this affidavit separately.

Letter of Indemnity

To, Systematix Shares and Stocks (I) Ltd. 2nd Floor, J.K Somani Bldg. British hotel lane, Fort Mumbai 400001.

Dear Sirs,		
Sub: Transmission of Mr/Mrs.	securities standing in	the name of Late
I/We hereby inform you that	at Mr./Mrs	
the deceased, was hole	ding a Client account no	o with
		Participant having DP ID
The said	deceased BO was holding the fo	ollowing securities:
ISIN	Name of Company	Number of securites
The said deceased died	intestate without leaving a	Will on the day of
	further inform you that he/sh	
	kin, the following persons acco	
	im/her by which he/she was go	overned at the time of his/her
death.		
(a)		
(b)		
(c)		
(C)		
We have, therefore, approac	hed you with a request to transf	er the aforesaid securities in
	Mr. / Mrs. / Ms	
my/our behalf without insist	ing on the production of a Succ	ession Certificate or an Order
	risdiction and you have kindly a	
2	s herein contained and on relying	g on the information herein
given by us believing the san	me to be true.	
In consideration therefore	of your having at our request ag	road to transfer securities to
severely agree and undertake	le to indemnify and keep indemn	ified, saved, defended.
	essors and assigns for all time he	
costs, claims, actions, deman	nds, risks, charges, expenses, da	mages, etc., whatsoever
	r incur by reason of your, at my	
said securities as herein abor	ve mentioned, to the undersigne	d

	without insisting on pr	roduction of a
Succession Certificate or an Order of t	he Court of competent jurisdi	ction.
IN WITNESS WHEREOF THE said _		have here unto set
their	[Name(s) of applicant(s)]	
respective hands and seals this	day of	of
Signed and delivered by the said applie	cant(s)	
Signature(s) of applicant(s)		
Date:	(3)	
Place:	(Signature of Magistra	te/Notary)
Full Name and Address of Magistrate	•	
Name :Address :		
PIN		
Registration No :		
Use space below to affix:		
Notarial / Court Fee Stamp	Official Seal of M	lagistrate / Notary

Note: This indemnity is to be executed in the presence of a first class or stipendiary Magistrate / Public notary / Judicial.